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۲۵ ۲۰۹۴	Please type a plus sign (+) inside this box	PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE					
/05/(Under the Paperwork Reduction Act of 1995, no persons are required to respo UTILITY	Attorney Docket No. FUJY 17.297					
	PATENT APPLICATION	First Inventor Y. NOMURA					
I	TRANSMITTAL	Title LABEL SWITCH NETWORK SYSTEM					
	(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EL522398398US					
	APPLICATION ELEMENTS	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application					
	See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Box Patent Application Washington, DC 20231					
	1. Fee Transmittal Form (e.g., PTO/SB/17) (Submat an original and a diglicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)					
	2. Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission					
	Specification [Total Pages 53]	(if applicable, all necessary) a. Computer Readable Form (CRF)					
,	- Descriptive title of the invention	b. Specification Sequence Listing on:					
	 Cross Reference to Related Applications Statement Regarding Fed sponsored R & D 	i. CD-ROM or CD-R (2 copies); or					
	 Reference to sequence listing, a table, or a computer program listing appendix 	i i. 🔲 paper					
	- Background of the Invention - Brief Summary of the Invention	c. Statements verifying identity of above copies					
	Brief Description of the Invention Firef Description Detailed Description	ACCOMPANYING APPLICATION PARTS					
	- Claim(s)	9. X Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of					
	- Abstract of the Disclosure	10. (when there is an assignee) Attorney					
	4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 12]	11. English Translation Dosument (<i>if applicable</i>)					
յուն։ Առուն գետել գիր, գիր, Առուն գետել մետել նետե	5. Oath or Declaration [Total Pages 3]	12 Statement (IDS)/PTO-1449 Citations					
Į.	a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d))	13. Preliminary Amendment Return Receipt Postcard (MPEP 503)					
	D. (for continuation/divisional with Box 18 completed)	(Should be specifically itemized)					
	i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
- s 21	named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35					
and and	6. Application Data Sheet. See 37 CFR 1.76	or its equivalent.					
angeni et al. Sectores et al. Sectores et al. Sectores et al.		17. Other:					
	 If a CONTINUING APPLICATION, check appropriate box, and support or in an Application Data Sheet under 37 CFR 1.76: 	ply the requisite information below and in a preliminary amendment,					
Easter F	Continuation Divisional Continuation-in-part (CIP)	of pnor application No.:/					
<u> </u>	Prior application information. Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of th	Group Art Unit:					
	Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
	19. CORRESPONDENCE ADDRESS						
	Customer Number or Bar Code Label 026304 or Correspondence address below (Insert Customer No or Attach bar code label here)						
	Name						
	Address						
	City	State Zip Code					
3. 	Country Tele	ephone Fax					
	Name (Print/Type) Samson Helfgott	Registration No. (Attorney/Agent) 23,072					
1 T		2105/04					
	Signature	Date 3/05/01					

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			Complete if Known							
FEE TRANSMITTAL			Appl	icatio	n Nurr	iber				
for FY 2001			Filing Date							
				First Named Inventor			Y. NOMURA			
Patent fees are subject to a	nual revision.		Exar	Examiner Name						
······································			Grou	Group Art Unit						
TOTAL AMOUNT OF PAYMENT	(\$) 804.00		Attor	Attorney Docket No. FUJY 17.2			Y 17.297			
	17									
The Commissioner is hereby authorized to charge indicated fees and credit any overnavments to:			FEE CALCULATION (continued) 3. ADDITIONAL FEES							
Deposit			Larg Enti		Sma Enti					
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Deposit Account Helfgott & Kara	s P C	Cod 105	le (\$) 130	Cod 205	e (\$) 65	Surcharge - late f	ilina fee or o	ath		
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Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17						cover sheet				
Applicant claims small entity status.		139	130	139	130	Non-English spec	fication			
2. X Payment Enclosed:		147	2,520	147	2,520	For filing a reque]	
Check Credit card Mor		112	920*	112	920*	Requesting public Examiner action	cation of SIR	prior to		
FEE CALCULATION			1,840*	113	1,840'	* Requesting public Examiner action	cation of SIR	after		
1. BASIC FILING FEE			110	215	55	Extension for rep	ly within first	month		
Large Entity Small Entity		116	390	216		Extension for rep	ly within seco	nd month		
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid	117	890	217		Extension for rep	•			
101 710 201 355 Utility filing fee	710		1,390			Extension for rep	ly within fourt	h month		
106 320 206 160 Design filing fee			1,890			Extension for rep	ly within fifth	month		
107 490 207 245 Plant filing fee		119	310	219		Notice of Appeal				
108 710 208 355 Reissue filing fee		120	310	220		Filing a brief in su		ppeal		
114 150 214 75 Provisional filing fe		121 138	270 1,510	221 138		Request for oral h	•	nroceeding		
SUBTOTAL (1)	(\$) 710	140	110	240	55		n to institute a public use proceeding			
2. EXTRA CLAIM FEES			1,240			Petition to revive				
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	8.00 = 54	143	440	243	220	Design issue fee				
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Fee Fee Fee Fee Fee Descripti	on	126	180	126	180	Submission of Inf				
Code (\$) Code (\$) 103 18 203 9 Claims in excess (of 20	581	40	581	40	Recording each p property (times no	atent assignr umber of prop	nent per perties)	40	
102 80 202 40 Independent clain 104 270 204 135 Multiple depende	ns in excess of 3 nt claim, if not paid	146	710	246	355	Filing a submissio (37 CFR § 1.129)		ejection		
109 80 209 40 ** Reissue indepe over original pa	ndent claims	149	710	249	355	For each addition examined (37 CF	al invention t R§1.129(b)	o be)		
110 18 210 9 ** Reissue claims	in excess of 20	179	710	279	355	Request for Conti	nued Examin	ation (RCE)		
and over original patent			900	169	900	Request for expe		ation		
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**or number previously paid, if greater; For Reissues, see above *Reduced by Ba										
SUBMITTED BY							Complete (if	applicable)		
Name (Pont/Type) Samson Helfgott			Registri (Attorney			23,072	Telephone	212-64	3-5000	
Signature	IVVAI	J			-		Date	3/04	5/01	

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